

Substitute for form 1449A/PTO		Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT		Application Number	
		Filing Date	
		First Named Inventor	Pat R. Mitchell
		Art Unit	
		Examiner Name	
(Use as many sheets as necessary)		Attorney Docket Number	465
Sheet	1	of	1

U. S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
01		US- 6 652 213	11/25/03	Mitchell	
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FOREIGN PATENT DOCUMENTS						
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Examiner Signature	<i>Ann A. Pota</i>	Date Considered	5-2-05
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